

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jan E. Schnitzer and Philip Oh

Serial No.: 09/208,195

Group Art Unit: 1646

Filed: December 9, 1998

Examiner: 1646

For: Immunoisolation of Caveolae

#16D1
1646

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231

on July 12, 1999 Date

[Signature] Signature

Hamilton B. Smith Typed or printed name of person signing certificate

July 12, 1999

TRANSMITTAL OF VERIFIED STATEMENT
AND REQUEST FOR REIMBURSEMENT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Please file the enclosed Verified Statement Claiming Small Entity Status in the above-identified patent application.

Applicant's Attorney respectfully requests a reimbursement of \$728.00, one-half of the total fees paid on May 11, 1999, to be deposited in Deposit Account No. 08-0380. This request is made within the two-month period allowed for such reimbursement.

A copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Doreen M. Hogle for Elizabeth W. Mata
Elizabeth W. Mata
Registration No. 38,236
Telephone (781) 861-6240
Facsimile (781) 861-9540

60:6 IN 22 JUL 1999

Lexington, Massachusetts 02421-4799

Dated: July 12, 1999

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VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(b))—INDEPENDENT INVENTOR

DOCKET NUMBER: BIDMC98-20

Applicant or Patentee: Jan E. Schnitzer and Phillip Oh
 Serial or Patent No.: 09/208,195
 Filed or Issued: December 9, 1998
 Title: Immunoisolation of Cytokine

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:

- ☐ the specification filed herewith with title as listed above.
☒ the application identified above.
☐ the patent identified above.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☐ no such person, concern, or organization exists.
☒ each such person, concern or organization is listed below.

Beth Israel Deaconess Medical Center
 330 Brookline Avenue
 Boston, Massachusetts 02215

Separate verified statements are required from each named person, concern, or organization having rights to the invention availing to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Jan E. Schnitzer
 NAME OF INVENTOR

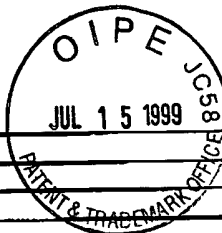
[Signature]
 Signature of Inventor

7/12/99
 Date

**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(d))-NONPROFIT ORGANIZATION**

DOCKET NUMBER: BIDMC98-20

Applicant or Patentee: Jan E. Schnitzer and Philip Oh
 Serial or Patent No.: 09/208,195
 Filed or Issued: December 9, 1998
 Title: IMMUNOISOLATION OF CAVEOLAE



I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF NONPROFIT ORGANIZATION Beth Israel Deaconess Medical Center
 ADDRESS OF NONPROFIT ORGANIZATION 330 Brookline Avenue
Boston, Massachusetts 02215

TYPE OF NONPROFIT ORGANIZATION:

- ☐ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
☒ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3))
☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA
 (NAME OF STATE _____)
 (CITATION OF STATUTE _____)
☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3)) IF
 LOCATED IN THE UNITED STATES OF AMERICA
☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED
 STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
 (NAME OF STATE _____)
 (CITATION OF STATUTE _____)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in:

- ☐ the specification filed herewith with title as listed above.
☒ the application identified above.
☐ the patent identified above.

I hereby declare the rights under contract or law have been conveyed to and remain with the nonprofit organization regarding the above identified invention. If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights in the invention must file separate verified statements averring to their status as small entities and that no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization having any rights in the invention is listed below:

- ☐ no such person, concern, or organization exists.
☒ each such person, concern or organization is listed below.

Jan E. Schnitzer
 1475 Trabert Ranch Road
 Encinitas, California 92024

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Dr. Mr. Barry Eisenstein

TITLE IN ORGANIZATION OF PERSON SIGNING Vice President of Science and Technology

ADDRESS OF PERSON SIGNING Beth Israel Deaconess Medical Center, 330 Brookline Avenue, Boston, Massachusetts 02215

SIGNATURE Barry Eisenstein DATE 7/12/99